



Powered Industrial Truck Operator (Forklift) Certification Renewal

Employee Name:	Organization:
Forklift MSFC No.:	Class:

Section 1 – Training

Answer the following questions to determine if refresher training is required.

Since last certification has:

- Employee regularly operated the forklift? Yes ☐ No ☐
- Employee consistently operated forklift safely with no accidents or close calls? Yes ☐ No ☐
- Workplace conditions where employee operates the forklift remained the same? Yes ☐ No ☐
- Class of forklift being operated remained the same? Yes ☐ No ☐

☐ If you answered "Yes" to all questions, retraining is **not** required, go to Section 2.

☐ If you answered "No" to any of these questions, retraining **is** required. Proof of employee completing SMA-SAFE-NSTC 0210, "Forklift Safety," SHE 506 "Equivalent Forklift Operation Refresher Training" or equivalent is attached.

Section 2 – Proficiency Evaluation

An evaluation of the forklift operator's performance is required.

This evaluation may be performed by one of the approved certified examiners listed in CERTRAK or by a qualified supervisor or lead.

☐ Approved Certified Examiner – the employee's proficiency exam is attached. (A NASA examiner can be scheduled to come to your site by calling the Industrial Safety Branch at 544-0046).

OR

☐ Qualified Supervisor or Lead – I am or have been certified for four or more years on similar class forklift(s) and have the knowledge and ability to perform the evaluation. My certification was documented in CERTRAK or other proof is attached. The employee's proficiency exam is attached.

Print Name _____ Org. Code: _____ Date: _____

Signature _____

Section 3 – Medical

A current medical exam is required.

☐ Approved medical exam results are attached.

Section 4 – Supervisor/Lead Concurrence

I concur with this evaluation and believe this employee is competent to operate the forklift(s) safely.

Print Name _____ Org. Code: _____ Date: _____

Signature _____